

10-30-00

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 UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</i>	Attorney Docket No.	99-26	Total Pages	80
	<i>First Named Inventor or Application Identifier</i>			
	BOWEN et al.			
	Title	Method And Apparatus For Monitoring and Controlling A Medical Device		
Express Mail Label No.		EL491476380US		



APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231											
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 64] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> -Descriptive title of the Invention -Cross References to Related Applications -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113) [Total Sheets 8]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. § 1.63(d)(2) and 1.33(b). c. <input checked="" type="checkbox"/> Unsigned </p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>		<p>6. DOMESTIC/INTERNATIONAL priority is claimed under 35 U.S.C. § 119(e)/120/365(c) based on the following provisional, nonprovisional, and/or PCT international applications.</p> <table border="1" style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">Application No.</th> <th style="text-align: center;">Filing Date</th> </tr> </thead> <tbody> <tr> <td>(1)</td> <td style="text-align: center;">60/162,677</td> <td style="text-align: center;">November 1, 1999</td> </tr> <tr> <td>(2)</td> <td></td> <td></td> </tr> </tbody> </table> <p>7. <input checked="" type="checkbox"/> Prior application is assigned to <u>Respirronics, Inc.</u> by Assignment recorded <u>November 26, 1999 Reel 010427 Frame(s) 0852.</u></p>				Application No.	Filing Date	(1)	60/162,677	November 1, 1999	(2)		
	Application No.	Filing Date											
(1)	60/162,677	November 1, 1999											
(2)													

ACCOMPANYING APPLICATION PARTS		
<p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) (Please return recorded assignment to the undersigned)</p> <p>9. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input checked="" type="checkbox"/> Certificate of Mailing by Express Mail</p> <p>16. <input type="checkbox"/> Other: _____</p>		

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application Information: Examiner: _____ Group/ArtUnit: _____

18. Please amend the specification by inserting before the first line the sentence: This is a Continuation Divisional
 Continuation-in-part (CIP) of prior application No. _____

19. CORRESPONDENCE ADDRESS

NAME	Michael W. Haas Intellectual Property Counsel RESPIRONICS, Inc.				
ADDRESS	1501 Ardmore Boulevard				
CITY	Pittsburgh	STATE	PA	ZIP CODE	15221-4401
COUNTRY	US	TELEPHONE	412-473-5026	FAX	412-473-5021

Name	Michael W. Haas	Reg. No.	35,174
Signature	<i>Michael W. Haas</i>	Date	October 27, 2000

FEE TRANSMITTAL

(Effective 10/01/2000)

"Express Mail" Label No. EL491476380US

TOTAL AMOUNT OF PAYMENT **\$ 1,676.00**

Application Number Not Yet Assigned

Filing Date October 27, 2000

First Named Inventor BOWEN et al.

Group Art Unit Unknown

Examiner's Name Unknown

Attorney Docket No. 99-26

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

50-0558

Respironics, Inc.

Charge any additional fee required under 37 C.F.R. §§ 1.16, 1.17, 1.19 and 1.20 Charge the Issue Fee set forth in 37 C.F.R. § 1.18

2. Payment Enclosed:

Check (Check No. 364)

FEE CALCULATION (fees effective 11/10/98)

1. FILING FEE

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
101	710	201 355 Utility filing fee	710.00
106	320	206 160 Design filing fee	
107	490	207 245 Plant filing fee	
108	710	208 355 Reissue filing fee	
114	150	214 75 Provisional filing fee	

SUBTOTAL (1) **\$ 710.00**

2. CLAIMS

		Extra Claims	Fee from Below	Fee Paid
Total Claims	47	-20*	27 x 18 =	486.00
Independent Claims	9	-3*	6 x 80 =	480.00
Multiple Dependent Claims add			270 =	0.00

* Enter Highest Number Previous Paid For

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 130 Multiple dependent claim
109	80	209 40 Reissue independent claims over original patent
110	18	210 9 Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **\$ 966.00**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or declaration	
127	50	227	25	Surcharge - late provisional filing fee or or cover sheet	
145	100	145	100	Certificate of Correction	
147	2,520	147	2,520	For filing a request for reexamination	
576	25	576	25	Additional filing receipt, duplicate or corrected due to applicant error	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	390	216	195	Extension for response within second month	
117	890	217	445	Extension for response within third month	
118	1,390	218	695	Extension for response within fourth month	
128	1,890	228	945	Extension for response within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application	
141	1,240	241	620	Petition to revive unintentionally abandoned application	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
148	110	248	55	Statutory Disclaimer	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (lines number of property)	
146	710	246	355	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 C.F.R. § 1.129(b))	
Other Fee (specify) _____					
Other Fee (specify) _____					

SUBTOTAL (3)

\$

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Typed or Printed Name

Michael W. Haas

Reg. Number

35,174

Signature

Michael W. Haas

Date

October 27, 2000

Deposit Account Number

50-0558

Certificate of Mailing by "Express Mail"

JC926 U.S. PTO
09/698743
10/27/00



EL491476380US

"Express Mail" label number

October 27, 2000

Date of Deposit

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and is addressed to:

Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.



Signature of person mailing correspondence

Michael W. Haas

Typed or printed name of person mailing correspondence

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